

**RULES OF
GEORGIA DEPARTMENT OF COMMUNITY HEALTH**

**CHAPTER 111-3
MEDICAL ASSISTANCE**

**SUBJECT 111-3-8
ESTATE RECOVERY**

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(1) After receipt of notice of the death of an affected Member, the Department will file a claim against the estate for the full value of the Medicaid benefits paid on behalf of the Member.

(2) No action to recover a debt due by the deceased Member shall be commenced against the personal representative until the expiration of six (6) months from the date of qualification of the first personal representative to serve.

(3) Notwithstanding any other law, a claim filed for recovery of Medicaid assistance has priority in order of payment from the estate over all other claims, except the following:

(a) Years support for the family;

(b) Funeral expenses in an amount not to exceed ten thousand dollars (\$10,000). However, this amount is zero (0) if the deceased Member has prepaid funeral expenses that were excluded as a resource for Medicaid eligibility;

(c) Necessary expenses of administration;

(d) Reasonable expenses of the deceased Member's last illness; and

(e) Unpaid taxes or other debts due the state or the United States. The category of Medicaid Estate Recovery is a debt due the state.

(4) The affidavit of a person designated by the Commissioner to administer this action is prima facie evidence of the amount of the claim.

(5) Notwithstanding any statute of limitations or other claim presentation deadline provided by law, a state claim against an estate is not barred for lack of timely presentation if it is presented in the probate proceeding within the time specified in the published notice to creditors.

(6) The personal representative must notify the Department in writing of the Member's death at least thirty (30) days before disbursing assets of the Member and shall not disburse assets prior to obtaining a release from the Department. Such notice must be sent to the Department via email at gaestater recovery@dch.ga.gov or via mail at Georgia Department of Community Health, Office of Inspector General, Medicaid Estate Recovery Program, 19th Floor, 2 M.L.K. Jr. Drive, SW, Atlanta, GA 30334, or such other mailing address listed for the Department's headquarters as set forth on its website located at www.dch.ga.gov. The personal representative is personally liable for any incorrectly paid assets if the Department is not informed of the Member's death and assets are distributed to Heirs and/or creditors without having first obtained a release from the Department. The Department shall issue a release within ten (10) business days from the satisfaction of the claim with the Department.

Authority: O.C.G.A. §§ 49-4-147.1, 53-7-42.